PTO/SB/06 (12-04) Approved for use through 7/31/2006, CMB 0661-0031 U.S. Potent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 Effective December 8, 2004 806,42 APPLICATION AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FLED NUMBER EXTRA RATE (1) FEE (\$) BASIC FEE RATE (\$) (3) CFR 1.16(a), (b), or (c)) N/A FEE (\$) NA NA 150.00 NA SEARCH FEE 300.00 · N/A (37 CFR 1 16(14, 1), or (m) NA. N/A \$250 N/A **EXAMINATION FEE** \$500 N/A . (3) CFR. 1.16(a), (p), or (q)) NA NVA \$100 NIA TOTAL CLAMS \$200 (37 CÉR 1.16(H) X\$ 25 .. minus 20 ≈ X\$50 INDEPENDENT CLAIMS OR (37 CFR 1.16(h)) X100 E aunim X200 If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each FEE (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.160) +180= +360= \* Kithe difference in column 1 is less than zero, enter "O" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3) OTHER THAN SMALL ENTITY OR CLAIMS SMALL ENTITY HIGHEST REMAINING NUMBER PRESENT. RATE (\$) -KDDA AFTER PREVIOUSLY RATE (\$) **EXTRA** ADOL-MENDMENT TIONAL PAID FOR TIONAL ENDME FEE (\$) Minus D7 CFR 1.10(1) FEE (\$) DO X\$ 25 X\$50 Independent D7 CFR 1.19(1) OR Minus X100 X200 Application Size Fee (37 CFR 1.16(s)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160) +180= +360= OR TOTAL TOTAL. ADD'L FEE OR ADD'L FEE

-		(Column 1)		(Column 2)	(Column 3)		
AMENDMENT B		CLAIMS REMAINING AFTER AMENOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total (37 CFR 1.16(1))		Minus	••	*		
	Independent professions	•	Minus	***	5		
	Application Size Fee (37 CFR 1.16(s))						
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160)						

RATE (\$)	ADOI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL
X\$ 25 .	·	OR	X\$50 .	FEE (3)
X100 "		OR 1	X200 _	
+180=		OR	+360=	
TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The Highest Number Previously Peld For (Total or Independent) is the highest number found in the appropriate box in column 1 This collection of Information is required by 97 CFR 1.16. The information is required to obtain or retain a benefit by the public which is lo file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments and the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief (information Officer, U.S. Patient and Trademark Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TQ: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.